



PTO/SB/82 (01-06)

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<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	<b>Application Number</b> 10/810,329 <b>Filing Date</b> March 26, 2004 <b>First Named Inventor</b> Ed Messina <b>Art Unit</b> 2129 <b>Examiner Name</b> Kalpama Bharadwaj <b>Attorney Docket Number</b> 139612-1

**I hereby revoke all previous powers of attorney given in the above-identified application.** A Power of Attorney is submitted herewith.**OR** I hereby appoint the practitioners associated with the Customer Number: 35684 Please change the correspondence address for the above-identified application to: The address associated with  
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I am the:

 Applicant/Inventor.  
 Assignee of record of the entire interest. See 37 CFR 3.71.  
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature

Name

Ed Messina

Date

Telephone

517-324-5414

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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